

as this magazine now prepares itself for the new millennium—thus the name change to 21st Century Christian.

But more outstanding than recognition, medals or fame is the story of how Jim Bill McInteer, M. Norvel Young, Winston Moore and several others courageously worked with this organization in its early stages, while having to overcome a mountain of adversity. They relentlessly pursued a way to relate the Gospel to the lives of people everywhere. And, of course, they faced the financial realities of such a venture, which would constantly whisper discouragement to them.

Yet, these Christian leaders were equipped with an extraordinary amount of faith and fortitude, desiring to see "New Testament Christianity" brought to the forefront of the modern age. They would work tirelessly knowing that many hurting people had a dire need to read and be encouraged by the Gospel.

As a result of the determination of Jim Bill McInteer and his partners, the 20th Century Christian magazine grew beyond its humble beginnings under the steps of the David Lipscomb College auditorium to a brand new 22,000 square-foot facility equipped with a bookstore, a warehouse filled with thousands of useful Christian books, Bibles and Christian curriculum materials.

Thanks to the services of the men and women at 21st Century Christian, the good news of the Gospel has reached and continues to reach the lives of many families all throughout Tennessee.

And I reserve a special "thank-you" to Jim Bill McInteer, whose visionary leadership and unselfish Christian service will have a far greater impact than his eyes will ever see. May God continue to shine upon his life, family and service as He has for the past 77 years. And may the future receivers and readers of 21st Century Christian literature forever be touched with the encouragement and inspiration that it has already brought to the lives of so many others.

THE STUDENT WINNERS OF THE 1998 EXPLORAVISION AWARDS

HON. GEORGE E. BROWN, JR.

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Friday, June 5, 1998

Mr. BROWN of California. Mr. Speaker, for the recognition of their achievement, I am inserting into the RECORD the names of the student winners of the 1998 ExploraVision Awards:***HD***1998 First Place Finalists

Holmes Elementary School, San Diego, CA; Grade Level: K-3; Project: Finders Keepers; Students: Ashlyn Hrenko, Rachel Sampson, Tyler Santander; Teacher Advisor: Diana Celle; Community Advisor: Steve Celle.

Pickens Academy, Carrollton, AL; Grade Level: 4-6; Project: Operation Odor Eater; Students: Wetherly Collins, Maggie King, William Webb Lavender; Teacher Advisor: Nita Bailey; Community Advisor: Natalie Lavender.

Kate Collins Middle School, Waynesboro, VA; Grade Level: 7-9; Project: In Vivo Cartilage Implants: The Technological Application of Tissue Engineering to Regenerate Articular Cartilage; Students: Andrew Humphries, Lauren Preski, Kristen Burgess, Elizabeth Anderson; Teacher Advisor: Dr. John E. Pierce; Community Advisor: David A. Burgess, MD.

University of Detroit Jesuit High School and Academy, Detroit, MI; Grade Level: 10-12; Project: SMAART: Shape Memory Alloys in Airplanes Reduce Turbulence; Students: Brett Lee, Joseph Oravec, William Schlotter, Daniel Tremiere; Teacher Advisor: Anne Moeser; Community Advisor: W. Charles Moeser.***HD***1998 Second Place Finalists

Bluemont Elementary School, Manhattan, KS; Grade Level: K-3; Project: DNA Door Opener; Students: Phillip Kuehl, Margaret Thomas, Jamon John, Benjamin Stark-Sachs; Teacher Advisor: Cynthia Garwick; Community Advisor: John Garwick.

Eugene Christian School, Eugene, OR; Grade Level: K-3; Project: The Tooth Buffer; Students: Scott Oplinger, Micah Randall, Alex Woldt; Teacher Advisor: Gwen Philipsen; Community Advisor: Thomas Zorn.

Mayfield Woods Middle School, Elkridge, MD; Grade Level: 4-6; Project: The Medwatch; Students: Andrew White, Robert K. Albin II, Christopher Perks, Nirav Parekh; Teacher Advisor: Lynn Birdsong; Community Advisor: Kem White.

Leeds Elementary School, Arlington, WI; Grade Level: 4-6; Project: The Smart Smoke Detector; Students: Charles Delorey, Jeffrey Mueller, Ashly Hall; Teacher Advisor: Jeffrey Stern; Community Advisor: Roger Bjorge.

Point Grey Mini School, Vancouver, BC; Grade Level: 7-9; Project: N.A.F.T.A.-Newron Activation: A Frequency Technology Application; Students: Barry Wohl, Robyn Massel, Carly Glanzberg, Isaac Elias; Teacher Advisor: John O'Connor; Community Advisor: Sanford Wohl.

John Burroughs School, St. Louis, MO; Grade Level: 7-9; Project: QUACK-The Duckweed Paper; Students: Anita Devineni, Eric Hirsh, Jonathan Pollock, Catherine Whyte; Teacher Advisor: Mary Harris; Community Advisor: Elaine Kilmer.

University Laboratory High School, Urbana, IL; Grade Level: 10-12; Project: NaMRh: The Tissue Engineered Nanomachine Monitored Replacement Heart; Students: Mara Bandy, Kim Ly, Zeynab Moradi, Anna Sczaniecka; Teacher Advisor: David Stone.

South Salem High School, Salem, OR; Grade Level: 10-12; Project: AntiQuake: Securing Society Through the Science of Nitinol; Students: Randy Kluver, Patrick Gilger, Daniel Gruber, Joy Harms; Teacher Advisor: Michael Lampert.

PARITY FOR MENTAL HEALTH CARE

HON. MARGE ROUKEMA

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Friday, June 5, 1998

Mrs. ROUKEMA. Mr. Speaker, I rise to bring to the attention of this Congress a study that has found that health insurance coverage for mental health is being cut far faster than insurance coverage for physical injury and illness.

This study found that mental health benefit costs have been slashed six times as often as general health benefit costs over the past 10 years. Where the value of general health benefits has declined 7 percent (from \$2,326.86 per covered individual in 1988 to \$2,155.60 in 1997), the value of mental health benefits has

declined 54 percent (from \$154.08 in 1988 to \$69.61 in 1997), according to the report.

This study was prepared by the Hay Group on behalf of the National Association of Psychiatric Health Systems, the Association of Behavioral Group Practices and the National Alliance for the Mentally Ill.

As the study shows, discrimination in benefits for mental health care persists. Mental health care has been, and remains, subject to different limits, caps, and deductibles than general health care. In addition, these caps, limits, and deductibles have not raised substantially in the past 10 years to account for inflation. That translates into additional erosion of the behavioral health benefit.

This is discrimination. And this is the reason the House Mental Health Working Group and I have introduced comprehensive legislation requiring health insurance companies to establish parity between mental health and substance abuse coverage and coverage for physical illnesses and injury.

The Mental Health and Substance Abuse Parity Act would prohibit insurance companies from setting spending limits for mental health and substance abuse coverage that are lower than limits set for physical illness or injury. Legislation introduced and passed with my initiative in 1996 prohibited unequal limits on annual and lifetime spending levels. This legislation goes further by prohibiting limitations on the frequency of treatments, number of visits, or other limitations on treatment not imposed for medical-surgical treatment. It would also prohibit copayments, deductibles, out-of-network charges, and out-of-pocket contributions or fees not imposed for medical surgical treatment.

This bill has been endorsed by the Coalition for Fairness in Mental Illness Coverage, which includes the American Medical Association, American Psychiatric Association, American Psychological Association, National Mental Health Association, National Alliance for the Mentally Ill, American Managed Behavioral Healthcare Association, Federation of American Health Systems and National Association of Psychiatric Health Systems.

The cost of mental health parity is small, especially when weighed against its benefits. A study by the Department of Health and Human Service's Office of Substance Abuse and Mental Health Services Administrations found the average increase in insurance premiums necessary to achieve parity for mental health coverage would be only 3.4 percent. Adding both mental health and substance abuse parity would require a combined increase of 3.6 percent.

Mental illness is not a character flaw, but a tangible treatable health problem as real as hypertension, cancer or heart disease. Today, the advances of our medical system have given us scientific breakthroughs that make appropriate care as effective for mental illness as insulin is for a diabetic.

It is time that health insurance plans recognize that mental illness is an illness. Most people who suffer from mental illnesses can live normal lives if they receive treatment but most can't receive treatment if their insurance won't pay for it.

The bottom line is that discrimination against people with mental and addictive disorders still exists. It must end.